PTO/SB/06 (12-04)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN (Column 1) SMALL ENTITY OR (Column 2) SMALL ENTITY FOR NUMBER FILEO NUMBER EXTRA RATE (S) BASIC FEE FEE (\$) FEE (\$) RATE (\$) (37 CFR 1,16(a), (b), or (c)) SEARCH FEE (37 CFR 1,16(k), (i), or (m)) EXAMINATION FEE (37 CFR 1, 15(0), (p), or (q)) TOTAL CLAIMS (37 CFR 1.16(i)) minus 20 = INDEPENDENT CLAIMS OR (37 CFR 1, 16(h)) minus 3 = x = If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due FEE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) . If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II 2-6-06 (Column 1) (Column 2) OTHER THAN OR (Column 3) SMALL ENTITY CLAIMS SMALL ENTITY HIGHEST REMAINING NUMBER PRESENT RATE (S) AFTER RATE (S) PREVIOUSLY ENT EXTRA AMENOMENT TIONAL PAID FOR TIONAL Total FEE (\$) Minus FEE (S) (37 CFR 1,15(d) 12 NOW 90 Independent (37 CFR 1.16(h)) OR Minus ũ Application Size Fee (37 CFR 1.16(s)) OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (07 CFR 1.16(ii)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Calumn 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING Oφ NUMBER PRESENT RATE (S) ADDI AFTER RATE (\$) PREVIOUSLY ADDI-EN EXTRA TIONAL MENDMENT PAID FOR TIONAL Total FEE (\$) FEE (\$) Minus **WON** (37 CFR 1.166) 20 x 50 OR Minus x 100 200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) 180 **3**60 OR TOTAL TOTAL OR ADD'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ADD'L PEE "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20". "If the Highest Number Previously Paid For In This SPACE is less than 3, enter "3".

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the eppropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the mount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademat Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS

ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.